





Survival Guide for Mandatory National Healthcare Safety Network (NHSN) Reporting for Long-Term Care Facilities (LTCFs)

HSAG can assist with NHSN data review, training, and support but final reporting to local, state, and/or federal groups is the responsibility of the LTCF. Facilities should pull final validation reports to determine if their data is successfully submitted.

For validation specific questions, please contact:

- LTCFs weekly reporting: <u>DNH_TriageTeam@cms.hhs.gov</u>
- Skilled nursing facilities quality reporting program: <u>SNFQualityQuestions@cms.hhs.gov</u>





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This Survival Guide for Mandatory NHSN Reporting for LTCFs was designed to help LTCFs better understand their NHSN reporting requirements, review key definitions, share common mistakes, and connect users to more in-depth training resources and guidance.

Health Services Advisory Group (HSAG) has seen common errors lead to Centers for Medicare & Medicaid Services (CMS) fines for facilities because of misunderstanding of COVID-19 reporting requirements, vaccine upto-date definitions, limited access to NHSN, and inadequate vaccination data collection processes. This Survival *Guide* will aid your facility in accurate reporting to NHSN.

NHSN Overview

The Centers for Disease Control and Prevention (CDC) NHSN is the nation's most widely used healthcareassociated infection (HAI) tracking system. NHSN provides facilities, states, regions, and the nation with data needed to identify problem areas, measure progress of prevention efforts, and ultimately eliminate HAIs.¹

There are several different ways to gain access to NHSN depending on the facility's current user access. However, each new NHSN user must become verified through The CDC's Secure Access Management Service (SAMS), which is a federal information technology (IT) system that gives authorized personnel secure access to non-public CDC applications. The SAMS partner portal is a website designed to provide centralized access to public health information and computer applications operated by the CDC. For the NHSN Program, SAMS will provide healthcare facilities and other partners, such as state health departments and Quality Improvement Organizations (QIOs), with secure and immediate access to the NHSN application.²

If you need assistance gaining access to NHSN, please refer to the link below or contact Simi Williams at swilliams1@hsag.com.



LTCF NHSN Frequently Asked Questions, Scenarios, and Important Links: www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfags2022final.pdf

NHSN Help Desk (via ServiceNow) ServiceNow can be accessed through your SAMS account, or on the NHSN website at https://servicedesk.cdc.gov.

SAMS Help Desk (via phone and email) Monday-Friday, 8 a.m.-6 p.m. EST **Excluding U.S. Federal Holidays** 877.681.2901 (Select Option #5) samshelp@cdc.gov





NHSN Reporting Requirements and Deadlines

Common challenges that lead to CMS fines and inaccurately reported public data include:

- Misunderstanding COVID-19 reporting requirements and vaccine up-to-date definitions.
- Inadequate vaccination data collection processes.
- Lack of access to NHSN and statewide vaccine registries.

LTCFs are required to report COVID-19 impact, therapeutics, and vaccination data, as well as report an annual healthcare personnel (HCP) influenza vaccination summary. Noncompliance related to COVID-19 reporting will be cited at F-tag 884, as well as failure to submit the required quality data may result in a 2 percent point reduction in the skilled nursing facility's (SNF's) annual rate update (i.e., Annual Payment Update [APU]).^{3,4}

This guide will help navigate the reporting requirements, provide definitions to reporting questions, and will include helpful tips to ensure your facility is reporting accurately.

	NHSN Reporting Description	NHSN Deadline								
•	 COVID-19/Respiratory Pathogens Pathway Data Reporting: Each week, new data should be reported representing the time since the last report date. 1. Resident Impact and Facility Capacity 2. Staff and Personnel Impact 	Reporting week is Monday through Sunday. Data must be submitted into NHSN once every reporting week. Report consistently each week.								
•	COVID-19 Vaccination Data Reporting : Cumulative data should be reported every week for all residents and staff		-	once p.m. (l	-	week b	etore s	Sunday	' at	
	 that were in your facility for the week of data collection. 1. LTCF Residents 2. LTCF HCP 			М	Т	w	Th	F	S	
				1	2	3	4	5	6	
	Use the recommended Person-Level Vaccination									
	Reporting Tool to standardize and simplify data monitoring and tracking.		7							
•	Annual Flu Vaccination Data Reporting for Health Care Personnel: CDC/NHSN encourages that HCP influenza vaccination summary data be updated monthly. However, to meet the minimum data requirements for NHSN participation, CMS only requires one influenza vaccination summary report to be submitted at the conclusion of the measure reporting period (October 1– March 31).	S	Summ NHSN	ary da	ta due	by Ma	y 15 ea	larch 3 ach yea ety (HPS	r in	



HEALTH SERVICES

NHSN COVID-19/Respiratory Pathogens Pathway Data Reporting

This Pathway Data Reporting module requires users to report COVID-19 staff and resident impact data, including testing data, testing supplies availability, therapeutics, and deaths. Noncompliance related to this pathway data reporting may subject your facility to Civil Monitory Penalties and a violation of F-tag 884 according to QSO-20-26-NH.5

Review the following screenshots for the questions listed on the three pathway reporting sections:

- **Resident Impact and Facility Impact** •
- Staff and Personnel Impact •

To make corrections to inaccurate submissions, go to Pathway Data Reporting > navigate to the week and date you want to correct > enter correct data > click "SAVE".

NHSN - Natio	nal	Healthcare Safety Network
NHSN Home Alerts		NHSN Long Term Care Facilit
Dashboard Reporting Plan	•	Long Term Care Dashboard
Resident Event	•	Action Items
Summary Data	•	Dashboard
Vaccination Summary	l	Pathway Data Reporting Konfe
Import/Export Surveys	,	POC Test Result Reporting N COVID-19 Event
Analysis	•	COVID-19 Vaccination - HCW COVID-19 Vaccination - Residents
Users Facility	•	Event-Level COVID-19 Vaccination Form - HCW
Group	×	Event-Level COVID-19 Vaccination Form - Residents
Tools POC Vocab	•	51 1
Dynamic Forms		Incomplete Events Missing





Resident Impact and Facility Capacity

Created:		
	t entered as the response. A blank response is equivalent to missing data. NON-count questions should be answered one calendar day during the reporting week.	
acility Capacity	ALLBEDS	
00	*CURRENT CENSUS: Total number of beds that are occupied on the reporting calendar day	
esident Impact for COV	VID-19 (SARS-CoV-2)	
	IVE TESTS: Enter the Number of residents with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR).	
	not include residents who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR), deresidents newly positive since the most recent date data were collected for NHSN reporting.	
accination Status of Re	skidents with a Newly Confirmed SARS-CoV-2 Viral Test Result	
	**Up to Date Vaccination Status	
Jp to Date: Include resi	idents with a newly positive SARS-CoV-2 viral test result who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date.	
	e current NHSN surveillance definition of <u>up to date.</u>	
Not Up to Date: Based of	on the counts entered for POSITIVE TESTS and UP TO DATE, the count for residents who are NOT considered up to date based on the NHSN Surveillance definition has been calculated here.	
This count is not editabl	le, to edit please update the count(s) entered for UP TO DATE and/or POSITIVE TESTS.	
lospitalizations		
	"Positive Tests" count reported above. Include only the number of new hospitalizations with a positive COVID-19 test since the most recent date data were reported to NHSN.	
*Hospitaliza	rations with a positive COVID-19 Test: Number of residents who have been hospitalized with a positive COVID-19 test.	
	nclude residents who have been hospitalized during this reporting period and had a positive COVID-19 test in the 10 days prior to the hospitalization, date of specimen collection is calendar day 1. • Hospitalizations with a positive COVID-19 test and U pto Date: Based on the number reported for 'Hospitalizations with a positive COVID-19 Test' indicates the number of residents who are hospitalized with positive COVID-19 Test's in the speciment of the speciment	COVID-19
	up to date with COVID-19 vaccinations at the time of the positive COVID-19 test.	00110 17
test and also		
test and also		
test and also	DEATHS: Number of residents who have died for <i>any</i> reason in the facility or another location. w the number of new deaths since the most recent date data were collected for NHSN reporting.	
test and also	DEATHS: Number of residents who have died for any reason in the facility or another location. y the number of new deaths since the most recent date data were collected for NHSN reporting. +COVID-19 DEATHS: Based on the number reported for Total Deaths, indicate the number of residents who died from COVID-19 or related complications, either in the facility or another location.	

Staff and Personnel Impact

Date Created: Counts should be reported on the correct calendar day and include only new counts for the calendar day (specifically, since counts were last collected). If the count is zero, a "O" must be entered as the response. A blank response is equivalent to missing data. NON-count questions should be answered one calendar day during the reporting week. Staff and Personnel Impact POSITIVE TESTS: Enter the number of staff and facility personnel with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). Note: Exclude staff and facility personnel newly positive since the most recent date data were collected for NHSN reporting	Resident Impact and Facility Capacity	Staff and Personnel Impact
be answered one calendar day during the reporting week. Staff and Personnel Impact POSITIVE TESTS: Enter the number of staff and facility personnel with a new/y positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). Note: Exclude staff and facility personnel who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR).	Date Created:	
* POSITIVE TESTS: Enter the number of staff and facility personnel with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). Note: Exclude staff and facility personnel who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR).	be answered one calendar day during the rep	
	* POSITIVE TESTS: Ent Note: Exclude staff and	facility personnel who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR).





NHSN COVID-19 Vaccination Data Reporting

The vaccination data reporting module collects data on the primary vaccine series, boosters, and up-to-date status for residents and HCP in the facility during the week of data collection (Monday–Sunday). This guide will focus on the resident questions.

There are three ways to report COVID-19 vaccinations in NHSN: (1) directly into the COVID-19 vaccination module, (2) through a CSV file upload into the COVID-19 vaccination module, or (3) through the person-level reporting module, which is the recommended route for vaccination entry.

To make corrections to inaccurate submissions, go to Vaccination Summary > return to the week and date you want to correct > delete incorrect response > enter correct number > click "SAVE".

Refer to APPENDIX A: COVID-19 Vaccination Overview for definitions on monovalent and bivalent booster vaccination, up to date vaccination status, and other resources.

NHSN Home		Naccina	tion Summary Data		
Alerts		Vaccina	cion Summary Data		
Dashboard		Click a cell	I to begin entering data for the w	veek which counts are re	ported.
Reporting Plan		Reporting of medica	al events or health problems that occur af	fter vaccination (possible side e	ffects) is encouraged, eve
Resident	•				
Event	•	<►	27 February 2023 - 09 April 2023	Record Complete	Record Incomplete
Summary Data	- E				
COVID-19	•	Weekly Vaccinati			
Vaccination Summa	ry .	02/27/2023 (Mon O COVID-19: H	iday) - 03/05/2023 (Sunday) ICP		
Import/Export		COVID-19: R	esidents		
Surveys					
Analysis	•				
Logout	l.	03/06/2023 (Mon	nday) - 03/12/2023 (Sunday)		
		COVID-19: R			





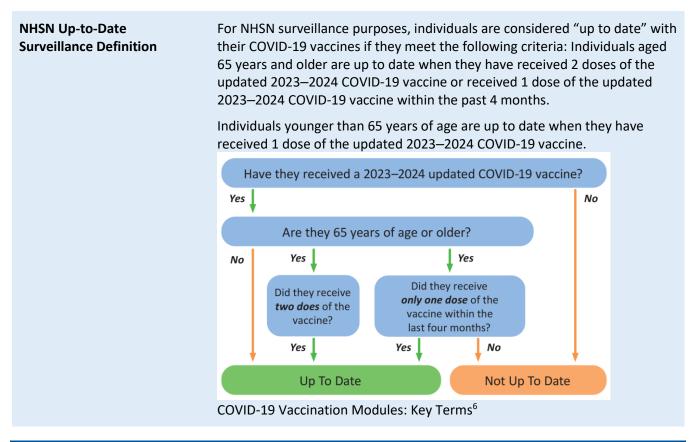
COVID-19 Vaccination Questions for Residents

OVID-19 Vaccine: HCP	COVID-19 Vaccine: Residen	ts			
Resident COVID-19 Cu	mulative Vaccination Summary	for Long-Term Care Fa	acilities		
Date Created:					
*Facility ID:	45188	*Vaccination type:	COVID19	Facility CCN #: 999991	
*Week of Data Collection: 07/10/2023 - 07/16/2023 *Date Last Modified:					
		Cumul	ative Vaccination Coverag	ge	
Person-Level COVID-19	Vaccination Form and select the "	view reporting summary th COVID-19 vaccination	and submit" to submit these on are categorized appropriat	on this form. As of March 28th, 2022 facilities also data. Using the person-level forms is recommende tely according to their vaccination dates.	
	r of residents in Question #1 who a	, ,			
Please review the curr	ent definition of <u>up to date:</u> Key	Terms and Up to Date '	Vaccination.		
3. * <u>Cumulative</u> numb	er of residents in Question #1 wi	th other conditions:			
	1 1 1 1 COM/D 40				
3.1 * Medical contra	indication to COVID-19 vaccine				
	lined COVID-19 vaccine				

Refer to the Instructions for Completion of the Weekly Vaccination Modules for Long-Term Care Facility Residents for more detail on each question:

https://www.cdc.gov/nhsn/pdfs/covid19/ltcf/vax-rpv-protocol-ltc-residents-oct-2023-508.pdf

Reminder: When submitting data, enter cumulative (total) vaccine numbers for all residents in the facility during the reporting week, **not** just the new data from the current reporting week.







0

Review the NHSN website quarterly to check for NHSN up-to-date definition updates. Use of the person-level reporting is recommended to ensure individuals who are up to date with COVID-19 vaccination are categorized and reported appropriately according to their vaccination dates. Refer to the Person-Level Vaccination Reporting section for more information.

Case Example

This small facility is licensed for 24 beds. During this current reporting week, the facility is full (census was 24). Half of the residents are long-term residents (n = 12) and half are short-stay residents (n = 12). All of the short stay and long-term residents are older than 65.

Of the long-term residents:

- 4 of the 12 have received the updated
 2023–2024 COVID-19 vaccine 6 months ago.
- 1 of the 4 above received a second dose of the 2023–2024 updated COVID-19 vaccine.
- 8 of the 12 declined the updated 2023–2024 COVID-19 vaccine.

NHSN Resident Vaccination Questions

- 1. Number of residents staying in this facility for at least 1 day during the week of data collection
- 2. Cumulative number of residents in question 1 who are up to date with COVID-19 vaccines.

Of the short-stay residents:

- 2 of the 12 have received the 2023–2024 updated COVID-19 vaccine 6 months ago.
- 1 of the 2 above received a second dose of the 2023–2024 updated COVID-19 vaccine.
- 10 of the 12 declined the updated 2023–2024 COVID-19 vaccine.

Calculation Notes	Total
24	24

3.	Cumulative number of residents in question 1 with other conditions:			
	3.1 Medical contraindication to COVID-19 vaccine	0	0	
	3.2 Offered but declined COVID-19 vaccine			
		3+8+1+10 = 22		
		Even though 4 long-term residents received the 2023– 2024 updated COVID-19 vaccine, it has been longer than 4 months, so they are no longer up to date until they receive a second dose. Even though 2 short-term residents received the 2023– 2024 updated COVID-19 vaccine, it has been longer than 4 months, so they are no longer up to date until	22	
		they receive a second dose.		
	3.3 Unknown COVID-19 vaccination status	0	0	

1 long term + 1 short stay = 2 2





Save Cancel

NHSN Case Vaccination Reporting Sample

Resident COVID-19	Cumulative Vaccination Summar	ry for Long-Term Care Fa	cilities						
Date Created:	09/27/2023 2:39PM								
*Facility ID:	45188	*Vaccination type:	COVID19		Facility CCN #	: 999991			
*Week of Data Colle	ection: 09/25/2023 - 10/01/202	23 *Date Last Modified	1: 09/28/2023 3	:27PM					
		Cum	ulative Vaccination	on Covera	ze				
	Weekly COVID-19 Vaccination Cu ination Form and select the "view re date with		nit" to submit these	e data. Usin	g the person-lev	el forms is recom	mended to ensure t		
1. * Number of resid	lents staying in this facility for at I	east 1 day during the wee	ek of data collectio	on				24	
2. * <u>Cumulative</u> num	ber of residents in Question #1 who	are up to date with COVID	-19 vaccines.					2	
Please review the cu	rrent definition of <u>up to date:</u> Ke	y Terms and Up to Date V	accination.						
3. * <u>Cumulative</u> nun	nber of residents in Question #1 v	with other conditions:							
3.1 * Medical cont	raindication to COVID-19 vaccine	e						0	
3.2 * Offered but of	leclined COVID-19 vaccine							22	
3.3 * Unknown/Ot	her COVID-19 vaccination status	5						0	
		Adverse Ev	ents following CC	OVID-19 V	accine(s)				
1	Clinically significant https://vaers.hhs.gov/reportevent	adverse events should b t.html. To help identify rep						S form.	
Clinically significa	nt adverse events include vaccine occ	e administration errors ar cur after vaccination, eve					onditions, or inpat	ient hospitali:	ation) that
Other clinically sig	nificant adverse events may be de Healthcare providers	escribed in the provider e should comply with VAEF						the COVID-1	9 vaccine(s).
1) The data reporte	a in NHSN, facilities are agreeing t d are consistent with definitions o ent to the Centers for Medicare a	outlined in NHSN surveill						ns).	

Case Summary

In order to be considered up to date, an individual 65 or older must either have received a second dose of the 2023–2024 updated COVID-19 vaccine or received their first dose of the 2023–2024 updated COVID-19 vaccine in the past 4 months. 4 of the 6 individuals that received only one dose of the 2023–2024 updated COVID-19 vaccine 6 months ago, are no longer considered up to date, as they have not yet received a second dose of the 2023–2024 updated COVID-19 vaccine. Thus, this facilities' resident up-to-date rate is only 8 percent and there is much room for improvement.

Resident Up-to-Date Vaccination Rate

Numerator (Q 2):	2
Denominator (Q 1– Q 3.1:	24
	2/24 = 8%



Double check any "0" data submissions, especially on Question 2. Errors reported on those questions will impact resident booster vaccination rate calculations.

Note: There is a variance between how HSAG and CMS Care Compare calculates the resident up-to-date vaccination rate. When HSAG calculates the resident up-to-date vaccination rate, the number of residents with medical contradictions is removed from the denominator.





Recommended NHSN Vaccination Reporting Tool

Person-Level Vaccination Reporting

The person-level COVID-19 vaccination form is an optional tool that can be used to report data to the long-term care weekly HCP and resident vaccination modules.⁷ This tool is only available for NHSN users with Level 3 access.

This reporting module in NHSN is meant to assist facilities with the tracking and interpreting resident and staff vaccination data. In this tab, facilities can upload patient and staff vaccination status, which may reduce the amount of interpretation required for NHSN COVID-19 vaccination reporting.

Person-level reporting is the recommended mode of data reporting and tracking in NHSN. This tool tracks resident and staff name, date of birth, gender, ethnicity, race, hiring, admittance, discharge and readmittance dates, as well as type and date of vaccinations received. Using these data, NHSN will automatically calculate and autofill the data required to submit weekly COVID-19 vaccination data, including determining who is up to date. Using this tool will organize facility vaccination data, reduce confusion during staff turnover, improve data reporting accuracy, and reduce time in reporting. However, to submit the weekly report through the person-level reporting module, facilities will need to login once a week, review the data, and click "SAVE".

NHSN Home		NHSN Long Term Care Fa
Alerts		
Dashboard	F	 Long Term Care Dashboard
Reporting Plan	۲	
Resident	×	 Action Items
Event	۲	
Summary Data	×	COMPLETE THESE ITEMS
COVID-19	×	Dashboard
Vaccination Summary		Pathway Data Reporting
Import/Export		POC Test Result Reporting
Surveys	÷	COVID-19 Vaccination - HCP
Analysis	F	COVID-19 Vaccination - Residents
Logout		Person-Level COVID-19 Vaccination Form - HCP
		Person-Level COVID-19 Vaccination Form - Residents





Add Row View Reporting Summary & Subm	t Upload CSV Expor	t CSV Export SQL					
Required fields marked with * Conditionally required fields marked	with X.2		-				
Duplicate Resident identifier * Res Row X + 1000000 SIMON		tesident Last Name *	Male 01/01/1950	* Ethnicity ** X X X Not Hispanic or Not Late In these will be filled in	Race **	Resident Admit Date * 03/28/2022	Resid
COVID-19 Vaccination Cumulative Summa	ry for Long-Term Care Facility F	Residents					
Person-Level Form Facility ID#:							
Vaccination type:			COVID19				
Week of data collection first day (Monday):				Re-submit all cha	nged weeks		
Week of data collection last day (Sunday):							
		Cumulative Va	ccination Coverage				
						* All Patients (To	otal)
 *Number of residents staying in this facil 						1	
2. *Cumulative number of residents in Que			Please review the current o	definition of up to date		1	
Please review the current definition of up		ate Vaccination.					
3. Cumulative number of residents in Ques							
3.1 *Medical contraindication to COVID-						0	
3.2 *Offered but declined COVID-19 vac						0	
3.3 *Unknown/Other COVID-19 vaccinal	on status					0	



Refer to the Person-Level Reporting How-To Guide for detailed instructions to use this tool. www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf





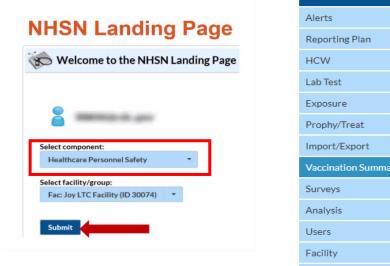
Annual Vaccination Flu Data Reporting

Reporting flu vaccines is not mandated, but it is a new CMS Quality Reporting Payment (QRP) measure and must be completed in NHSN. If a SNF fails to submit the required annual quality data, the SNF will be subject to a 2 percent point reduction in the Annual Payment Update for the applicable performance year.

To properly complete this QRP measure, the influenza vaccination status of all HCP who have worked at the facility for at least one day between the period of October 1 and March 31 must be documented in NHSN on or before May 15. This includes all influenzas vaccinations received by staff members on- and off-site of the facility.

These data are to be reported in the HPS component, which must be added by your NHSN facility administrator. The NHSN facility administrator must have Level 3 access in NHSN to add this HPS component. Once added, you can access this component on your NHSN home landing page.

To access the annual influenza report, on your landing page, switch the component to Healthcare Personnel Safety > Vaccination Summary > Annual Vaccination Flu Summary.



NHSN Home		MHSN Healthcare P
Alerts		
Reporting Plan	•	 Action Items
HCW	•	Action tems
Lab Test	•	You have no action items.
Exposure	•	
Prophy/Treat	•	
Import/Export		Assurance of Confidentiality: The volunt:
Vaccination Summary	•	Annual Vaccination Flu Summary 🕨
Surveys		Get Adobe Acrob
		Get Adobe Acrob
Analysis	•	ADOBE" READER"
Analysis Users	• •	Get Adobe* READER*
	+ + +	Get Adobe* READER*
Users	<pre></pre>	Get Adobe* READER*





Date Last Modified:							
	Employee HCP	Non-Employee HCP					
HCP categories	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/ trainees & volunteers *	Other Contract Personnel			
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31 $$							
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season							
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season							
4. Number of HCP who have a medical contraindication to the influenza vaccine							
5. Number of HCP who declined to receive the influenza vaccine							
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)							

Refer to the CDC Healthcare Personnel Vaccination Module Influenza Vaccination Summary Comprehensive Training Slides for additional reporting guidance.

https://www.cdc.gov/nhsn/pdfs/training/hcp/hcp-flu-vaccination-summary-reporting-generaltraining-508.pdf

Refer to APPENDIX C Annual Influenza Reporting for guidance on adding the NHSN HPS component.





Running Reports

As an NHSN user, you can mass-analyze all the data you have been reporting to NHSN. Running reports allows you to analyze and sort your data. Running reports can also help facilities identify if they have any missed weeks of data reporting. This is a helpful tool to use if you are reviewing your data to meet QRP deadlines. When you run these reports, you have the option of downloading them as a CSV file so you can access them as a spreadsheet to analyze and sort the data.

To run and analyze reports, go to Analysis > Reports > access the report you are interested in running.

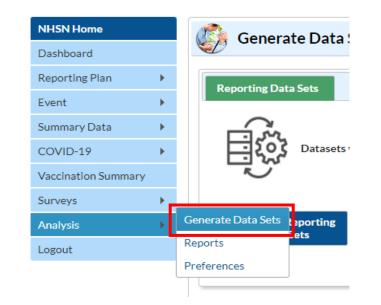
NHSN Home								
Dashboard	Analysis Reports							
Reporting Plan	Expand All Collapse All							
Event •								
Summary Data								
COVID-19	Process Measures							
	COVID-19 Module							
Vaccination Summary	🚽 🔚 Resident Impact and							
Surveys •								
Analysis 🔶 🕨	Generate Data Sets upplies and Person							
Logout	Reports Centilator Capacity							
0	Preferences herapeutics							
	Weekly Influenza Va							
COVID-19 Mod	dule							
🕬 📴 Resident Im	npact and Facility Capacity							
🕬 📴 Staff and Pe	ersonnel Impact							
🗁 🚞 Supplies and	d Personal Protective Equipment							
Ventilator Capacity and Supplies								
🗁 Therapeutic	cs							
	uenza Vaccination							
👘 🗁 POC Testing	g							

- COVID-19 Vaccination
 COVID-19 Vaccination (Pre-10.0)
- COVID-19 Events

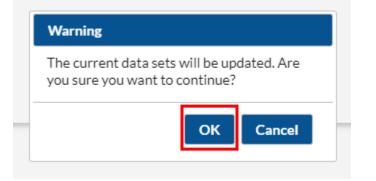
It is important to generate new data sets every new week you are running your data report. Generating new data sets will update your reports with the newest data available in NHSN.



To generate new data sets, go to Analysis > Generate Data Sets > click Generate Data Sets > select 'OK' on the pop-up screen > wait until data sets have been generated.



NHSN Home		Generate Data Sets (Long Term Care Facility)					
Dashboard							
Reporting Plan	•	Reporting Data Sets					
Event	•	Reputuing Date Jets					
Summary Data	•						
COVID-19	•	Datasets will be generated to include all data from enrollment forward					
Vaccination Summary							
Surveys	•						
Analysis	•	Generate Reporting Data Sets Last Generated: March 2, 2023 11:47 AM					
Logout		to include all data					







APPENDIX A: COVID-19 Vaccination Overview

COVID-19 vaccinations have proven to be effective, safe, and help to prevent severe illness, hospitalizations, and death from COVID-19.⁸

2023–2024 Updated COVID-19 Vaccine

The 2023–2024 updated COVID-19 vaccine more closely targets the XBB lineage of the Omicron variant and could restore protection against severe COVID-19 that may have decreased over time. As of October 3, 2023, the 2023–2024 updated Novavax vaccine was recommended by CDC for use in the United States. As of September 12, 2023, the 2023–2024 updated Pfizer-BioNTech and Moderna COVID-19 vaccines were recommended by CDC for use in the United States. We anticipate the updated vaccines will be better at fighting currently circulating variants. There is no preferential recommended, and age-appropriate vaccine is available.⁹

- <u>Everyone aged 5 years and older ‡</u> should get **1 dose of an updated COVID-19 vaccine** to protect against serious illness from COVID-19.⁹
- <u>Children aged 6 months–4 years</u> need multiple doses of COVID-19 vaccines to be <u>up to date</u>, including at least 1 dose of updated COVID-19 vaccine.⁹
- <u>People who are moderately or severely immunocompromised</u> may get additional doses of updated COVID-19 vaccine.⁹
- People aged 65 years and older who received 1 dose of any updated 2023–2024 COVID-19 vaccine (Pfizer-BioNTech, Moderna or Novavax) should receive 1 additional dose of an updated COVID-19 vaccine at least 4 months after the previous updated dose.⁹

2023–2023 Bivalent Vaccines

The 2022–2023 bivalent vaccines were designed to protect against both the original virus that causes COVID-19 and the Omicron variants BA.4 and BA.5. Two COVID-19 vaccine manufacturers, Pfizer-BioNTech and Moderna, had developed bivalent COVID-19 vaccines. As of September 11, 2023, the bivalent Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States.¹¹

Original Vaccines

Previous COVID-19 vaccines were called "original" because they were designed to protect against the original virus that causes COVID-19. As of April 18, 2023, the original Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States. As of May 6, 2023, J&J/Janssen COVID-19 vaccine is no longer available for use in the United States.¹¹

Staying Up to Date

CDC recommends the 2023–2024 updated COVID-19 vaccines: Pfizer-BioNTech, Moderna, or Novavax, to protect against serious illness from COVID-19. Everyone aged 5 years and older ‡ should get 1 dose of an updated COVID-19 vaccine to protect against serious illness from COVID-19. Children aged 6 months–4 years need multiple doses of COVID-19 vaccines to be up to date, including at least 1 dose of updated COVID-19 vaccine. People who are moderately or severely immunocompromised may get additional doses of updated COVID-19 vaccine. People aged 65 years and older who received 1 dose of any updated 2023–2024 COVID-19



vaccine (Pfizer-BioNTech, Moderna or Novavax) should receive 1 additional dose of an updated COVID-19 vaccine at least 4 months after the previous updated dose. COVID-19 vaccine recommendations will be updated as needed. People who are up to date have lower risk of severe illness, hospitalization and death from COVID-19 than people who are unvaccinated or who have not completed the doses recommended for them by CDC.⁹ Individuals are considered up to date with their COVID-19 vaccines, for the purpose of NHSN surveillance if they meet the following criteria*:

• Individuals aged 65 years and older are up to date when they have: Received 2 doses of the updated 2023–2024 COVID-19 vaccine or Received 1 dose of the updated 2023–2024 COVID-19 vaccine within the past 4 months.

Individuals younger than 65 years of age are up to date when they have: Received 1 dose of the updated 2023–2024 COVID-19 vaccine*. As of September 12, 2023, the 2023–2024 updated Pfizer-BioNTech and Moderna COVID-19 vaccines were recommended by the CDC for use in the United States. The 2023–2024 updated COVID-19 vaccine more closely targets the XBB lineage of the Omicron variant and could restore protection against severe COVID-19 that may have decreased over time. Individuals are also considered up to date if they received a 2023–2024 updated COVID-19 vaccine.

**As of September 12, 2023, the bivalent COVID-19 vaccines are no longer FDA-authorized.

Misunderstanding COVID-19 reporting requirements and vaccine up-to-date definitions can lead to CMS fines and inaccurately reported public data. See below example with decision tree diagram regarding up-to-date vaccination status.⁹

APPENDIX B: Influenza Reporting

Follow these instructions to activate the HPS component in NHSN (this only needs to be completed once). The NHSN facility administrator is the only eligible person to activate the HPS component for QRP reporting. The NHSN facility administrator must have level 3 access in order to add this HPS component.

To activate the HPS component:

1. On the left-hand panel, select Facility, then select Add/Edit Component.





2. Check the box next to HPS.

Components Followed

Follow/ Followed	Component	Activated	Deactivated	Agreement Accepted	View Agreement
	Biovigilance				
	Dialysis				
	Healthcare Personnel Safety	09/30/2022		Y	View Agreement
×	Long Term Care Facility	05/08/2020		Y	View Agreement
	Neonatal				
	Outpatient Procedure				
	Patient Safety				

3. An alert will appear stating that you need to assign a primary contact. HSAG recommends assigning yourself as the HPS Primary Contact. There should be an option for existing users at the top of the contact information. Once you save the contact information, click on Update at the bottom of the screen.

Contact Information

	Contact Type
Edit	Facility Administrator
Edit	Long Term Care Facility Primary Contact
Edit	Healthcare Personnel Primary Contact

The box next to "Healthcare Personnel Safety" must be checked after updating the contact. If not, check it again and then click on update.

To access the HPS component:

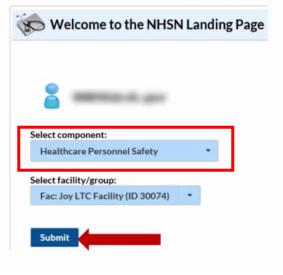
1. Click on NHSN Home.

NHSN Home	
Alerts	
Dashboard	•
Reporting Plan	×.
Resident	•
Event	•
Summary Data	•
COVID-19	•



- On the landing page, use the dropdown under Select Component and choose Healthcare Personnel Safety. Make sure your facility is selected, then click on Submit.
- 3. Accept the Terms of Use Agreement. *Tip: Scroll down and to the right to check the box to accept.*

NHSN Landing Page







APPENDIX C: Quality Tips and Resources



Review, print, and use the Summary of NHSN COVID-19 Reporting Requirements to improve reporting adherence.

	NHSN Reporting Description				NHSN Deadline							
 COVID-19/Respiratory Pathogens Pathway Data Reporting: Only new data should be reported representing the time since the last report date. 1. Resident Impact and Facility Capacity 2. Staff and Personnel Impact 				Reporting week is Monday through Sunday. Data must be submitted into NHSN once every reporting week. Report consistently each week. Report once every week before Sunday at								
•	 COVID-19 Vaccination Data Reporting: Cumulative data should be reported every week for all residents and staff 				every JTC).	weeк р	etore :	sunday	at			
	that were in your facility for the week of data collection. 3. LTCF Residents			М	Т	w	Th	F	S			
	4. LTCF HCP			1	2	3	4	5	6			
	Use the recommended Person-Level Vaccination Reporting Tool to standardize and simplify data monitoring and tracking.	7										
•	• Annual Flu Vaccination Data Reporting for HCP: CDC/NHSN encourages that HCP influenza vaccination summary data be updated monthly. However, to meet the minimum data requirements for NHSN participation, CMS only requires one influenza vaccination summary report to be submitted at the conclusion of the measure reporting period (October 1–March 31).			ry da		by Ma		larch 3 ich yea				

Check the NHSN website on a quarterly basis to monitor definition changes of up-to-date vaccination status. COVID-19 Vaccination Modules: Understanding Key Terms and Up-to-Date Vaccination: www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-508.pdf



Use Person-Level Vaccination Reporting to organize facility vaccination data, reduce confusion during staff turnover, improve data reporting accuracy, and reduce time on reporting. How-To Guide: www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-grg-508.pdf





When submitting data, enter cumulative (total) vaccine numbers for all residents in the facility during the reporting week, not just the new data from the current reporting week.



Refer to the CDC COVID-19 Vaccination Schedules for current vaccination recommendations. Guidance is available for people ages 12 years and older (people who are and are not moderately or severely immunocompromised).

Key NHSN Resources

LTCF NHSN Frequently Asked Questions, Scenarios, and Important Links www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfaqs2022final.pdf

Instructions for Completion of the Weekly COVID-19 Vaccination Cumulative Summary for Residents of LTCFs www.cdc.gov/nhsn/forms/instr/COVIDVax.LTC_.Residents.TOI_.MAY2022-508.pdf

Person-Level Reporting How-to Guide www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf

CDC Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#not-immunocompromised

CDC Reporting Weekly Influenza Vaccination Data www.cdc.gov/nhsn/pdfs/training/hcp/weekly-fluvax-training-508.pdf





References

- 1. CDC. About NHSN. April 25, 2023. Available at: https://www.cdc.gov/nhsn/about-nhsn/index.html.
- CDC. About SAMS. March 15, 2023. Available at: <u>https://www.cdc.gov/nhsn/sams/about-sams.html#:~:text=What%20is%20SAMS%3F,to%20non%2Dpublic%20CDC%20applications</u>
- 3. CDC. FAQs on Reporting COVD-19 Vaccination Data. March 10, 2023. Available at: https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html
- 4. CMS. QSO Notice QSO-21-19-NH Interim Final Rule—COVID-19 Vaccine Immunization Requirements for Residents and Staff. May 11, 2021. Available at: <u>https://www.cms.gov/files/document/qso-21-19-nh.pdf</u>
- 5. CMS Compliance Group, Inc. Ftags of the Week F884 and F885 COVID-19 Tags. May 8, 2020. Available at: https://cmscompliancegroup.com/2020/05/08/ftags-of-the-week-f884-f885-covid-19-ftags/
- 6. CDC. Quick Learn Demonstration: Reporting Weekly Cumulative COVID-19 Vaccination Data. May 2021. Available at: https://www.cdc.gov/nhsn/pdfs/hps/covidvax/cumulativeData-ql-508.pdf
- 7. NHSN. Person-Level COVID-19 Vaccination Forms: A How-To Guide. Available at: https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf
- 8. CDC. COVID-19 Vaccine Effectiveness. March 23, 2023. Available at: <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/overview-COVID-19-vaccines.html</u>
- 9. CDC. Stay Up to Date with COVID-19 Vaccines Including Boosters. May 11, 2023. Available at: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html
- CDC. Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States. May 16, 2023. Available at: <u>https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#not-immunocompromised</u>
- 11. NHSN. COVID-19 Vaccine Modules: Key Terms. Available at: <u>UpTo Date Guidance Quarter 2 Of 2023</u> <u>mockup_508 (cdc.gov)</u>.

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